



ATTORNEY DOCKET NO. 04150.0016U1
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of)

EDWIN et al.)

Application No.: 10/521,820)

Filing Date: May 23, 2005)

For: **METHOD AND APPARATUS FOR**)
DETERMINING THE THICKNESS OF)
A CHROMIUM DEPLETED ZONE OF)
A SURFACE REGION OF A STEEL)
MEMBER)

Art Unit: 2862

Examiner: **Jay M. Patidar**

Confirmation No.: 2413

TRANSMITTAL LETTER

Mail Stop AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.

Customer Number 23859

June 10, 2008

Sir:

Transmitted herewith is/are the following in the above-identified application:

- | | | |
|-------------------------------------|--|---|
| <input checked="" type="checkbox"/> | Supplemental Response to Final Office Action | |
| <input checked="" type="checkbox"/> | Fee as calculated below | <input checked="" type="checkbox"/> Request for Extension of Time |
| <input type="checkbox"/> | No Additional Fee Required | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> | Replacement Drawing Sheet | <input type="checkbox"/> Other _____ |

CLAIMS AS AMENDED							
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDITIONAL FEE
Total Claims	17		20	0	X \$50.00		\$0.00
Independent Claims	3		3	0	X \$210.00		\$0.00
<input type="checkbox"/> First Presentation of a Multiple Dependent Claim					+ \$370.00		\$0.00
EXTENSION FEE	1 st Month \$120 <input checked="" type="checkbox"/>	2 nd Month \$460 <input type="checkbox"/>	3 rd Month \$1050 <input type="checkbox"/>	4 th Month \$1640 <input type="checkbox"/>	5 th Month \$2230 <input type="checkbox"/>		\$120.00
<input type="checkbox"/> Reduction by ½ for filing by SMALL ENTITY (Note 37 C.F.R. §1.9, §1.27, §1.28) -							- \$0.00
TOTAL FEE DUE							\$120.00

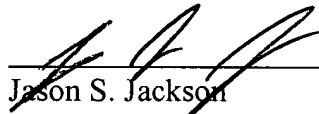
ATTORNEY DOCKET NO. 04150.0016U1
APPLICATION NO. 10/521,820

Payment:

- ☐ A check in the amount of \$ _____ is enclosed.
- ☒ Payment by credit card in the amount of \$120.00 for the fees designated above is submitted via enclosed Form PTO-2038.
- ☐ Payment by credit card in the amount of \$0.00 for the fees designated above is submitted via EFS-Web.
- ☐ The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$ _____ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.
- ☒ In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.

Respectfully submitted,

NEEDLE & ROSENBERG, P.C.



Jason S. Jackson
Registration No. 56,733

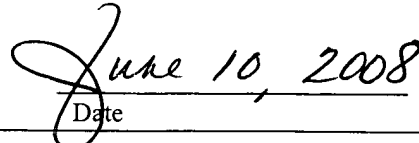
NEEDLE & ROSENBERG, P.C.
Customer Number 23859
(678) 420-9300
(678) 420-9301 (fax)

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

I hereby certify that this correspondence, including any items indicated as attached or included, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below.



Beverly Hopkins



Date